**Epping Town Council**

**Application for Grant Aid 2025/26**

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| Name of Organisation |
| Name of Contact person |
| Mailing AddressTel: |
| Aims of Organisation (as stated in constitution) |
| Registered Charity Yes/No No: ………………….. |
| \*Income of Organisation in last Financial year? £………………..(Please state main sources of income) |
| \*Expenditure of Organisation in last financial year? £………………..(Please state main items of expenditure) |
| How much grant are you applying for? |
| What is the grant required for? |
| Other Grant providers approached? Were these applications successful?  |
| What benefits will the grant provide for the people of Epping and which sections of the community will benefit? |

\*Brief notes to be entered here. You should attach your last financial statement.